

MISSOURI
SECTION 1115 FAMILY PLANNING DEMONSTRATION
FACT SHEET

Program Name: **Women's Health Services Program**

Initial Comprehensive Application

Date Proposal Submitted: June 30, 1994

Date Proposal Approved: April 29, 1998

Date of Implementation: May 1, 1998

Expiration Date: March 1, 2004

First Renewal

Date Proposal Approved: August 25, 2003

Expiration Date: March 1, 2007; temporary extension through August 31, 2007, temporary extension September 14, 2007

New Family Planning Stand-Alone Demonstration

Date Proposal Submitted: May 11, 2007

Date Approved: October 15, 2007

Effective Date: October 1, 2007

Date of Implementation: September 14, 2007

Expiration Date: September 30, 2010

ELIGIBILITY

Missouri's Women's Health Services Program provides family planning services to uninsured postpartum women ages 18 to 55 who are losing their Medicaid eligibility 60 days after the birth of their child. These women are eligible for women's health services for a maximum of 1 year after their Medicaid eligibility expires. These women are not otherwise eligible for Medicaid, SCHIP, Medicare, or the State's Health Insurance Flexibility and Accountability demonstration.

FAMILY PLANNING SERVICES

Family planning services include medically necessary services and supplies related to birth control, pregnancy prevention and preventive services. Services include contraceptive management with a variety of methods, patient education, counseling, and referral as needed to other social services and health care providers.

Specific family planning services include:

- Approved methods of contraception;
- Sexually transmitted disease testing and treatment, including pap tests and pelvic exams;
- Family planning counseling/education on various methods of birth control; and
- Drugs, supplies, or devices related to women's health services described above that are prescribed by a physician or advanced practice nurse (subject to the national drug rebate program requirements).

COST SHARING

There is no cost sharing (premiums or copayments) for enrollees covered under the family planning demonstration. Services are obtained through the Managed Care Plus (MC+) fee for service program

PRIMARY CARE REFERRAL SYSTEM

Enrollees requiring primary care services will be referred through partnerships with Federally Qualified Health Centers and the Missouri Primary Care Association. Missouri has demonstrated that there will be adequate referrals and access to comprehensive primary health care services for family planning demonstration enrollees.

EVALUATION

The State's evaluation plan will continue to focus and improve on demonstration objectives such as:

- Increasing access to and use of family planning services for women of ages 18 to 55 who are losing their Medicaid eligibility 60 days after the birth of their child;
- Decreasing the number of Medicaid paid deliveries (which will result in a decrease in annual expenditures for prenatal, delivery, newborn and infant care);
- Increasing the proportion of clients who receive help to access primary care services and comprehensive health coverage; and
- Ensuring that any new eligibility verification procedures implemented in the renewal period are cost effective.

ESTIMATED ENROLLMENT AND FEDERAL SAVINGS

- Demonstration enrollment for FFY 2006 was 86,706.
- The demonstration is expected to serve approximately 50,615 participants over the 3-year extension period.
- It is projected that \$109,722,660 in Federal funds will be saved over the 3-year extension period.

Date Last Updated: November 15, 2007